

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SNT	68903	12/5/99
O.I.P.E. CLASSIFIER	MTW	5a	12-11-99
FORMALITY REVIEW	KAS	610080	3/6/2000
RESPONSE FORMALITY REVIEW			4/18/2000

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim#	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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